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A

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

**Attorney Docket No.** 03141- P0381A

**First Inventor** Avinash Dalmia, et al.

**Title** Integrated Electrochemical Gas Generator

**Express Mail Label No.** EL 574 211 028 US

10/22/01  
10/22/01

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

|   |  |
|---|--|
| 1. <input checked="" type="checkbox"/>  | Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original, and a duplicate for fee processing) |
| 2. <input type="checkbox"/>   | Applicant claims small entity status<br>See 37 CFR 1.27.   |
| 3. <input checked="" type="checkbox"/>  | Specification [Total Pages 24]<br>(preferred arrangement set forth below)                          |
| <ul style="list-style-type: none"> <li>- Descriptive title of the Invention</li> <li>- Cross References to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claims(s)</li> <li>- Abstract of the Disclosure</li> </ul> |  |
| 4. <input checked="" type="checkbox"/>  | Drawings(s) (35 USC 113) [Total Sheets 6]  |
| 5. Oath or Declaration  | [ Total Pages 2 ]  |
| <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> New executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d))<br/>(for continuation/divisional with Box 18 completed)</li> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br/>Signed statement attached deleting inventors(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul>   |  |
| 6. <input type="checkbox"/>   | Application Data Sheet. See 37 CFR 1.76  |

**ADDRESS TO:** Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

|   |   |
|---|---|
| 7. <input type="checkbox"/>   | CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) |
| 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  |   |
| <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li> <li>b.: Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul> </li> </ul> |   |
| c. <input type="checkbox"/> Statement verifying identity of above copies  |   |

**ACCOMPANYING APPLICATION PARTS**

|   |   |
|---|---|
| 9. <input type="checkbox"/>             | Assignment Papers (cover sheet & document(s))   |
| 10. <input type="checkbox"/>            | 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney                     |
| 11. <input type="checkbox"/>            | English Translation Document (if applicable)  |
| 12. <input type="checkbox"/>            | Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations                    |
| 13. <input type="checkbox"/>            | Preliminary Amendment   |
| 14. <input checked="" type="checkbox"/> | Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)   |
| 15. <input type="checkbox"/>            | Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)  |
| 16. <input type="checkbox"/>            | Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. |
| 17. <input type="checkbox"/>            | Other.....  |

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part of prior application No.:

Prior application information: Examiner Group/Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

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| <input checked="" type="checkbox"/> Customer Number of Bar Code Label | 24126<br>(Insert Customer No. or Attach bar code label here) | <input checked="" type="checkbox"/> Correspondence address below |                     |
| Name  | Wesley W. Whitmyer, Jr.                                      |  |                     |
| Address   | St. Onge Steward Johnston & Reens LLC<br>986 Bedford Street  |  |                     |
| City  | Stamford   | State CT   | Zip Code 06905-5619 |
| Country   | United States  | Telephone 203 324-6155   | Fax 203 327-1096    |

|                   |                         |                                   |        |
|-------------------|-------------------------|-----------------------------------|--------|
| Name (Print/Type) | Wesley W. Whitmyer, Jr. | Registration No. (Attorney/Agent) | 33,558 |
| Signature         | 10/22/01                |                                   |        |

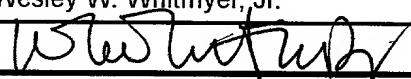
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# FEE TRANSMITTAL for FY 2001

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TOTAL AMOUNT OF PAYMENT (\$ 1308.00) Attorney Docket Number 03141-P0381A WWW/DC

| METHOD OF PAYMENT (check one)  |                      |   |                 |  |          | FEE CALCULATION (continued)   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--|----------------------|---|-----------------|--|----------|---|----------|-------------------|--|---------------------|--|----------------------------|----------------------|----------------------------|-----------------|-----------------|----------|-----------------|----------|-----|-----|-----|----|-------------------------------------|--|--|--|-----|----|-----|----|--|--|--|--|-----|-----|-----|-----|---------------------------|--|--|--|-----|-------|-----|-------|---|--|--|--|-----|------|-----|------|--|--|--|--|-----|--------|-----|-------|---|--|--|--|-----|-----|-----|----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-------|-----|-----|---|--|--|--|-----|-------|-----|-----|--|--|--|--|-----|-----|-----|-----|------------------|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-----|-----|-----|--------------------------|--|--|--|-----|-------|-----|-------|---|--|--|--|-----|-----|-----|----|----------------------------------|--|--|--|-----|-------|-----|-----|------------------------------------|--|--|--|-----|-------|-----|-----|--------------------------------|--|--|--|-----|-----|-----|-----|------------------|--|--|--|-----|-----|-----|-----|-----------------|--|--|--|-----|-----|-----|-----|-------------------------------|--|--|--|-----|----|-----|----|-------------------------------------|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|----|-----|----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|--|--|--|--|-----|-----|-----|-----|---|--|--|--|-----|-----|-----|-----|---|--|--|--|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|------------------------------------|--|-------------------|--|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:</p> <p>Deposit Account Number <b>19-4516</b></p> <p>Deposit Account Name <b>St.Onge Steward Johnston &amp; Reens LLC</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under CFR 1.16 and 1.17</p> <p><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> |                      |   |                 |  |          | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge – late filing for or oath</td><td></td><td></td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge – late provisional filing or cover sheet</td><td></td><td></td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td><td></td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td><td></td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td><td></td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner Action</td><td></td><td></td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td><td></td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td><td></td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td><td></td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td><td></td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td><td></td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td><td></td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td><td></td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td><td></td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td><td></td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive – unavoidable</td><td></td><td></td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive – unintentional</td><td></td><td></td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td><td></td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td><td></td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td><td></td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td><td></td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td><td></td><td></td></tr> <tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Informational Disclosure Stmt</td><td></td><td></td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per Property (times number of properties)</td><td></td><td></td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td><td></td><td></td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td><td></td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td><td></td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td><td></td><td></td></tr> <tr><td colspan="6">Other fee (specify) _____</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr> <td colspan="6"></td> <td colspan="2">* Reduced by Basic Filing Fee paid</td> <td colspan="2">SUBTOTAL (3) (\$)</td> <td colspan="2">40.00</td> </tr> <tr> <td colspan="6"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> </tbody> </table> |          |                   |  |                     |  | Large Entity Fee Code (\$) | Entity Fee Code (\$) | Small Entity Fee Code (\$) | Entity Fee (\$) | Fee Description | Fee Paid | Fee Description | Fee Paid | 105 | 130 | 205 | 65 | Surcharge – late filing for or oath |  |  |  | 127 | 50 | 227 | 25 | Surcharge – late provisional filing or cover sheet |  |  |  | 139 | 130 | 139 | 130 | Non-English specification |  |  |  | 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination |  |  |  | 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action |  |  |  | 113 | 1,840* | 113 | 1,840 | Requesting publication of SIR after Examiner Action |  |  |  | 115 | 110 | 215 | 55 | Extension for reply within first month |  |  |  | 116 | 400 | 216 | 200 | Extension for reply within second month |  |  |  | 117 | 920 | 217 | 460 | Extension for reply within third month |  |  |  | 118 | 1,440 | 218 | 720 | Extension for reply within fourth month |  |  |  | 128 | 1,960 | 228 | 980 | Extension for reply within fifth month |  |  |  | 119 | 320 | 219 | 160 | Notice of Appeal |  |  |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  |  |  | 121 | 280 | 221 | 140 | Request for oral hearing |  |  |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  |  |  | 140 | 110 | 240 | 55 | Petition to revive – unavoidable |  |  |  | 141 | 1,280 | 241 | 640 | Petition to revive – unintentional |  |  |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  |  |  | 143 | 460 | 243 | 230 | Design issue fee |  |  |  | 144 | 620 | 244 | 310 | Plant issue fee |  |  |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  |  |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  |  |  | 126 | 240 | 126 | 240 | Submission of Informational Disclosure Stmt |  |  |  | 581 | 40 | 581 | 40 | Recording each patent assignment per Property (times number of properties) |  |  |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) |  |  |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR 1.129(b)) |  |  |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  |  |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  |  |  | Other fee (specify) _____ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | * Reduced by Basic Filing Fee paid |  | SUBTOTAL (3) (\$) |  | 40.00 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Large Entity Fee Code (\$)   | Entity Fee Code (\$) | Small Entity Fee Code (\$)  | Entity Fee (\$) | Fee Description  | Fee Paid | Fee Description   | Fee Paid |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 105  | 130                  | 205   | 65              | Surcharge – late filing for or oath  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 127  | 50                   | 227   | 25              | Surcharge – late provisional filing or cover sheet                         |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 139  | 130                  | 139   | 130             | Non-English specification  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 147  | 2,520                | 147   | 2,520           | For filing a request for ex parte reexamination                            |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 112  | 920*                 | 112   | 920*            | Requesting publication of SIR prior to Examiner action                     |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 113  | 1,840*               | 113   | 1,840           | Requesting publication of SIR after Examiner Action                        |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 115  | 110                  | 215   | 55              | Extension for reply within first month                                     |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 116  | 400                  | 216   | 200             | Extension for reply within second month                                    |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 117  | 920                  | 217   | 460             | Extension for reply within third month                                     |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 118  | 1,440                | 218   | 720             | Extension for reply within fourth month                                    |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 128  | 1,960                | 228   | 980             | Extension for reply within fifth month                                     |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 119  | 320                  | 219   | 160             | Notice of Appeal   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 120  | 320                  | 220   | 160             | Filing a brief in support of an appeal                                     |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 121  | 280                  | 221   | 140             | Request for oral hearing   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 138  | 1,510                | 138   | 1,510           | Petition to institute a public use proceeding                              |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 140  | 110                  | 240   | 55              | Petition to revive – unavoidable   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 141  | 1,280                | 241   | 640             | Petition to revive – unintentional   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 142  | 1,280                | 242   | 640             | Utility issue fee (or reissue)   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 143  | 460                  | 243   | 230             | Design issue fee   |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 144  | 620                  | 244   | 310             | Plant issue fee  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 122  | 130                  | 122   | 130             | Petitions to the Commissioner  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 123  | 50                   | 123   | 50              | Processing fee under 37 CFR 1.17(q)  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 126  | 240                  | 126   | 240             | Submission of Informational Disclosure Stmt                                |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 581  | 40                   | 581   | 40              | Recording each patent assignment per Property (times number of properties) |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 146  | 740                  | 246   | 370             | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 149  | 740                  | 249   | 370             | For each additional invention to be examined (37 CFR 1.129(b))             |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 179  | 740                  | 279   | 370             | Request for Continued Examination (RCE)                                    |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 169  | 900                  | 169   | 900             | Request for expedited examination of a design application                  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Other fee (specify) _____  |                      |   |                 |  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                      |   |                 |  |          | * Reduced by Basic Filing Fee paid  |          | SUBTOTAL (3) (\$) |  | 40.00               |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |                      |   |                 |  |          |   |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SUBMITTED BY <b>St.Onge Steward Johnston &amp; Reens LLC</b>   |                      |   |                 |  |          | Complete (if applicable)  |          |                   |  |                     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name (Print Type)  |                      | <b>Wesley W. Whitmyer, Jr.</b>  |                 | Registration No (Attorney/Agent)   |          | <b>33,558</b>   |          | Telephone         |  | <b>203 324-6155</b> |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Signature  |                      |  |                 |  |          |   |          | Date              |  | <b>10/24/01</b>     |  |                            |                      |                            |                 |                 |          |                 |          |     |     |     |    |                                     |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |                           |  |  |  |     |       |     |       |   |  |  |  |     |      |     |      |  |  |  |  |     |        |     |       |   |  |  |  |     |     |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |       |     |     |   |  |  |  |     |       |     |     |  |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |                          |  |  |  |     |       |     |       |   |  |  |  |     |     |     |    |                                  |  |  |  |     |       |     |     |                                    |  |  |  |     |       |     |     |                                |  |  |  |     |     |     |     |                  |  |  |  |     |     |     |     |                 |  |  |  |     |     |     |     |                               |  |  |  |     |    |     |    |                                     |  |  |  |     |     |     |     |   |  |  |  |     |    |     |    |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |  |  |  |  |     |     |     |     |   |  |  |  |     |     |     |     |   |  |  |  |                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                    |  |                   |  |       |  |  |  |  |  |  |  |  |  |  |  |  |  |

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